Image# 10992500629

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZA	ATION		
i Oitim i	(See instruction	ns)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Mississippi Po	wer Company Federal PAC a/k/a	/ Ms Pwr Co Emp Comm	for Re-	
				11111111
ADDRESS (number and s	treet) 2992 West Beach Blv	/d 		
(Check if address				
is changed)	Gulfport,		MS	39502 4079
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAII	_ ADDRESS (Please provide only one e-			
(Check if address X is changed)	ablackbu@southern	co.com 		
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address				
is changed)	1			
2. DATE 12	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION	TION NUMBER	C C00144147		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
	_			
I certify that I have examin	ned this Statement and to the best of my kno	wledge and belief it is true, correc	t and complete	
Type or Brint Name of 3	Freasurer Mrs. Anne B Lad	ner		
Type or Print Name of T	reasurer			
Signature of Treasurer	Electronically Filed by Mrs. Anne	B Ladner	Date 12	D 22 Y Y 2010
NOTE: Submission of fals	se, erroneous, or incomplete information may	, ,		
	ANY CHANGE IN INFORMA	TION SHOULD BE REPORTE	D WITHIN 10 DAYS	S
Office Use Only		For further information Federal Election Communication Free 800-424-953	nission	FEC FORM 1 (Revised 02/2009)

	F	FEC F	Form 1 (Revised 02/2009)	Page 2
5.			OMMITTEE (Check One) Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete tinformation below.)	he candidate
	Name Candi			
	Candi Party	idate Affiliatio	on Office Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candi			
	Party	Comm		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
Political Action Committee (PAC):				
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
			X Corporation Corporation w/o Capital Stock La	bor Organization
			Membership Organization Trade Association Co	poperative
			χ In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint F	Fundra	ising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	
			2. FEC ID number	
			3. FEC ID number	
			. FEC ID number C	

	FEC Form 1 (Revised 02	/2009)		Page 3
W	rite or Type Committee Name			
	Mississippi Power Com	pany Federal PAC a/k/a/ Ms Pwr	Co Emp Comm for Resp	Fed Gov
6.	Name of Any Connected Org	anization, Affiliated Committee, Join	t Fundraising Representative,	or Leadership PAC Sponsor
Ш	Mississippi Power Comp	any		
	Mailing Address	2992 West Beach B	lvd.	
		Gulfport	MS	39502 _ 4079
		CITY	STATE	ZIP CODE 🛦
	Relationship:			
	X Connected Organization	Affiliated Committee	Joint Fundraising Representat	ive Leadership PAC Sponsor
	Full Name	Gulfport		395024079
	Title or Position ♥	CITY A	STATI	EA ZIP CODE A
	Treasurer		Telephone number	228 - 865 - 5318
8.	name and address of any	and address (phone number opt designated agent (e.g., assistant nne B Ladner	•	committee; and the
		Cultiva and		20500 4070
	T	Gulfport		
	Title or Position ♥	CITY 🛦	STAT	EA ZIP CODE A
	Treasurer		Telephone number	228 _ 865 _ 5318

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Full Name of Designated Agent	Mr. John W. Atherton		
Mailing Address	2992 West Beach Blv	rd.	
	Gulfport,		39502 – 4079
Title or Position ▼	CITY A	STATE A	ZIP CODE A
Chairn	man	Telephone number	8641211
Mailing Address			
	Gulfport		
	[MS	39501
	CITY 🗖	STATE △	39501 ZIP CODE 🛕
Name of Bank, Deposito	CITY 🗖		
Name of Bank, Deposito	CITY 🗖		
Name of Bank, Deposito	CITY 🗖		
	CITY 🗖		
L	CITY 🗖		

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the s funds.	•	•
Name of Bank, Depository, etc.		Ι	ADDITIONAL]
Mailing Address			
1			
1			
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
	nization, Affiliated Committee, Joint Fundraisi		
ALABAMA POWER CO E	MPLOYEES FEDERAL POLITICAL ACTION	ON CMTE (APC EMPLOYE	EES FEDERAL PAC)
Mailing Address	600 NORTH 18TH STREET		
Mailing Address	PO Box 2641		
	Birmingham	, , <mark>A</mark> L	35291
ationship:	CITY▲	STATE A	ZIP CODE A
Connected Organization	X Affiliated Committee Joint Fundrais	sing Representative Lead	ership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name Miss D	Oonna L. Wilkerson		
Mailing Address	2992 West Beach Blvd.		
	Gulfport	<u>MS</u>	39502 _ 4079
Title or Position ♥	Gulfport CITY A		39502 _ 4079 ZIP CODE ∆
	CITY A		
·	CITY A	STATE & 228	ZIP CODE A

Banks or Other Depositories safety deposit boxes or mainta		nittee deposits funds, hold	ls accounts, rents
Name of Bank, Depository, etc		I	[ADDITIONAL]
Mailing Address			
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	CITY 🛕	STATE ∡	ZIP CODE 🛕
	CHTA	STATE	
Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Re	presentative, or Leader	[ADDITIONAL] ship PAC Sponsor
GEORGIA POWER COM	IPANY FEDERAL PAC INC		
<u> </u>			
Mailing Address	241 Ralph McGill Boulevard NE		
	Atlanta	GA L	30308
) a latina a la inc	CITY▲	STATE A	ZIP CODE
Relationship: Connected Organization	X Affiliated Committee Joint Fundraising Ro	epresentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Designated Agent Mr. M	lichael R. Harvey		
Full Name			
Mailing Address	2992 West Beach Blvd.		
	Gulfport	MS	39502 _ 4079
	duiport		
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
Secretar		228	864 1211
	T elep	hone number	
Joint Fundraiser Participant			[ADDITIONAL]
	F	EC ID number	

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the committee	e deposits funds, ho	olds accounts, rents
Name of Bank, Depository, etc.	Tallac.		[ADDITIONAL]
Mailing Address			
l			
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
	nization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leado	[ADDITIONAL] ership PAC Sponsor
Mailing Address	1 ENERGY PLACE		
	PO BOX 1151		
	PENSACOLA	Ĺ <mark>FL</mark> ↓	32520
elationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Repres	sentative Le	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
			_
Title or Position ▼	CITY A	STATE.	ZIP CODE A
	Telephone	number	
Joint Fundraiser Participant			[ADDITIONAL]
	FEC	ID number C	

Banks or Other Depositories: safety deposit boxes or maintain:	List all banks or other depositories in which the comm	nittee deposits funds, hold	s accounts, rents
Name of Bank, Depository, etc.	s idital.	Ī	ADDITIONAL]
Mailing Address			
	CITY 🛕	STATE. △	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Re	presentative, or Leader	[ADDITIONAL] ship PAC Sponsor
SOUTHERN COMPANY E	MPLOYEES PAC		
Mailing Address	241 RALPH MCGILL BOULEVARD NE		
Mailing Address	BIN 10111		
	, ATLANTA	, , GA, ,	30308 , ,
Relationship:	CITY▲	STATE 🛕	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Re	epresentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
•			
			_
Title or Position ▼	CITY A	STATE &	ZIP CODE A
	Talank	none number	
	пеерг	IONE HUMBE	
Joint Fundraiser Participant			[ADDITIONAL]
	F	EC ID number	

Banks or Other Depositories: safety deposit boxes or maintain	List all banks or other depositories in which the committee s funds.	e deposits funds, ho	olds accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address	<u> </u>		
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leade	[ADDITIONAL]
	SOUTHERN NUCLEAR OPERATING COMPANY I		· · ·
Mailing Address	42 Inverness Center		
	Birmingham	LLL L	35242
Relationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Repres	sentative Le	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE	ZIP CODE A
	Telephone	number	
Joint Fundraiser Participant			[ADDITIONAL]
1		ID number C	-
		ID HUITIDEI	